PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 10796085

											<u> </u>	O(k)
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN	
TOTAL CLAIMS			. 29					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			79 mi	nus 20=	• 4			XŞ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			✓ minus 3 =) ·		X43=		OR	X86=	
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					. 4.6	 			
* If the difference in column 1 is less than zero, en					"0" in (column 2		+145=	-	OR	+290=	
CLAIMS AS AMENDED - PART II							•	TOTAL	509	OR	TOTAL	THAN
<u>3</u>	-10-06	(Column 1)	(Column 2) (Column 3)					SMALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	· 24	Minus	- Q ⁰	9	=		X\$ 9=		OR	X\$18=	
AME	Independent	<u>· 3</u>	Minus	***	} ·	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
								TOTAL		1	TOTAL	
										OR	ODIT. FEE	•
-	·	(Column 1)		(Colum		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	•• .	•	=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		- .		X43=		OR	X86=	
	FINST PRESE	NTATION OF MU	LIPLE DEF	ENDENT	CLAIM			+145=	·	OR	+290=	
								TOTAL DDIT, FEE	•	OR	TOTAL ODIT, FEE	
		(Calumn 1)		(Colum	n 2)	(Column 3)			•			•
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	er Jsly	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE	ſ	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		8	Γ	X\$ 9= .		OR	X\$18=	
	Independent	•	Minus	194A		=	上	X43=		ľ	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR	~~~	
• #	the entry in entry	+145=		OR	+290=							
H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previousty Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previousty Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT, FEE	
T	he "Highest Num	moer Previously Paid ber Previously Paid	ip For (Total or	SPACE IS I	iess thair i) is the	n 3, enter "3." . highest number		OIT. FEE L	ropriate box	•		•